FEC FORM 1

STATEMENT OF ORGANIZATION

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FEC MAIL CENTER

FORM 1		ONGANIZ	ATION		FEC MAIL CENT
NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M	5
Michigan Pipe Trade	Association Inde	pendent Expenditure	e Political Committee (MPAC I	ndependent Ex	penditure Political Committee)
	10		v Drivo		
ADDRESS (number an	nd street)	08 O'Malle	y Dilve		
(Check if ac is changed)	Idress CC	opersville		MI	49404
			CITY	STATE	ZIP CODE
COMMITTEE'S E-MA	•		·		
(Check if	address [m	mangione@	@ua174.org,,slm	ning@co	merica,com
is change	d)				
COMMITTEE'S WEB	PAGE ADDRESS	(URL)			
(Check if	addrass L			<u> </u>	
is change		1 1 1 1 1 1 1			
2. DATE 01	13°	2014			
3. FEC IDENTIFIC	CATION NUMBER	C			
4. IS THIS STATES	MENT N	EW (N) OR	AMENDED (A)		
I certify that I have e	examined this Stat	əment and to the be	st of my knowledge and belief	it is true, correc	ct and complete.
Type or Print Name	of Treasurer	MARK D.	MANGIONE		
Signature of Treasure	er Mus	60 Ma	MANGIONE Ingion	Date 0	' <u>'</u>
NOTE: Submission of		•	n may subject the person signing		to the penalties of 2 U.S.C. §437g.
Office Use			For further information Federal Election Commis Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

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TYPE OF C	COMMITTEE	
Candidate	e Cetnmiäae:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	lete the candidate
Name of Candidate	<u> </u>	
Candidate Party Affiliati	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		1
Party Con		
(d)		Democratic, Republican, etc.) Party.
Political A	Action Committee (PAC):	
(e) X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	nected organization is a
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
Com	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number C	
4.		

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Write or Type Committee Name		rage 0
	on Independent Expenditure Political Committee (MPAC Independent Expend	diture Political Committee)
6. Name of Any Connected (Drganization, Affiliated Committee, Joint Fundraising Representative, or Lea	dership PAC Sponsor
Michigan Pipe i	rades Association	
Mailing Address	[1008] Q'Malley Drive	
	[Qoppersville	9404.
	CITY STATE	ZIP CODE
Relationship: Connecte	d Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Records: Idea books and records. 	ntify by name, address (phone number optional) and position of the person i	n possession of committee
Full Name Come	erica Bank	
Mailing Address	PAC Services, MC2250	
Mailing Address	P.O. Box 75000	
		3275 ₁₋₁ 2250 1
Title or Position	CITY STATE	ZIP CODE
		ZII OODE
Recordkeeper	Telephone number [248]	_[371,
8. Treasurer: List the name ar any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	ne name and address of
Full Name of Treasurer	Mangione	
Mailing Address	1008 O'Malley Drive	
	1	1
	Coopersyille MI 49	9404 -
Title or Position	CITY STATE	ZIP CODE
PAC Treasurer	Telephone number [616]	_ [837,[0222 , _]

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Full Name of Designated Agent		1 1 1 1 1 1	
Mailing Address		1 1 1 1 1 1	
	CITY	STATE	ZIP CODE
Title or Position	Telephone	number 1	<u></u>
 Banks or Other safety deposit b Name of Bank, 		nmittee deposits	funds, holds accounts, rents
	Comerica Bank		
Mailing Address	[P _r Q. Box ₁ 75000		
		<u> </u>	
	[Detroit , , , , , , , , , , , , , , , , , , ,	<u> </u>	48275
	CITY	STATE	ZIP CODE
Name of Bank,	Depository, etc.		
Mailing Address			
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